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Atty. Dkt. No. 053466-0286

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Yasuko OZAKI et al.
Title: IMMUNOCHEMICAL ASSAY
FOR ANTI-HM1.24 ANTIBODY
Appl. No.: 09/622,646
Filing Date: 08/21/2000
Examiner: Deborah A. Davis
Art Unit: 1655
Confirmation Number: 8792

AMENDMENT TRANSMITTAL

Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

[X] The fee required for additional claims is calculated below:

	Claims As Amended	Previously Paid For	Extra Claims Present	Rate	Additional Claims Fee
Total Claims:	15	- 20	= 0	x \$50.00	= \$0.00
Independent Claims:	3	- 3	= 0	x \$200.00	= \$0.00
First presentation of any Multiple Dependent Claims:			+	\$360.00	= \$0.00
CLAIMS FEE TOTAL					= \$0.00

[X] Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

[X] Extension for response filed within the first month:	\$120.00	\$120.00
[] Extension for response filed within the second month:	\$450.00	\$0.00
[] Extension for response filed within the third month:	\$1,020.00	\$0.00
[] Extension for response filed within the fourth month:	\$1,590.00	\$0.00
[] Extension for response filed within the fifth month:	\$2,160.00	\$0.00
EXTENSION FEE TOTAL:		\$120.00
[] Statutory Disclaimer Fee under 37 C.F.R. 1.20(d):	\$130.00	\$0.00
CLAIMS, EXTENSION AND DISCLAIMER FEE TOTAL:		\$120.00
[] Small Entity Fees Apply (subtract ½ of above):		\$0.00
Extension Fees Previously Paid:		\$0.00
TOTAL FEE:		\$120.00

A credit card payment form in the amount of \$120.00 is enclosed.

The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by the credit card payment form being unsigned, providing incorrect information resulting in a rejected credit card transaction, or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date September 4, 2007

By _____

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AMENDMENT AND REPLY UNDER 37 CFR 1.116

Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

This communication is responsive to the Final Office Action dated May 4, 2007, concerning the above-referenced patent application.

Applicant has enclosed with this amendment a Petition for Extension of Time to make this response timely.

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this document.

Remarks/Arguments begin on page 6 of this document.

Please amend the application as follows:

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